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FEC FORM

STATEMENT OF ORGANIZATION

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<u> </u>					<u> </u>	office Cod MALI	CENTER
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		imple:If typing, type r the lines.	12FE4M5	!!	
Elect Hanne	osh C	ommittee ,					l
			1 1 6 1				
ADDRESS (number and	d street)	7636 Iceho	use Ca	anyon Road	<u> </u>		
(Check if address is changed)		Mt. Baldy			CA -	91759	
		•	CITY		STATE	ZIP CODE	
COMMITTEE'S E-MAII (Check if a is changed	uddress			aulhannosh	.com	1 	
COMMITTEE'S WEB I	PAGE ADD	RESS (URL)				j	
(Check if a is changed	ddress	www.paulh	annos	h _r com			
2. DATE 10	.	Ź013 ·					
3. FEC IDENTIFICA	ATION NUI	MBER (e in the second of the second			
4. IS THIS STATEM	ENT X	NEW (N)	R [AMENDED (A)		i	
I certify that I have ex	,	Statement and to the Kathryn H		knowledge and belief	it is true, correct	and complete.	
Signature of Treasurer	olle	chrip III	anno	<u></u>	Date [1]	1062	10 13
NOTE: Submission of fa		•	-	bject the person signing OULD BE REPORTED V		-	S.C. §437g.
Office Use				For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM (Revised 02/20)	